

AUBURN MUNICIPAL COURT
PROBATION SERVICES DIVISION
340 E Main St, Suite 101 Auburn, WA 98002

Case # _____

MONTHLY REPORT FORM

Complete in FULL

This report shall NOT be considered a fulfillment of your reporting unless completed in Full

Name : _____ Employer/Occupation : _____

Address : _____ New Address : Yes: _____ No: _____
Living With? _____

Apt. # _____	City _____	Zip _____
Cell Phone: (____) _____	New Number: Yes: _____	No: _____
Home Phone (____) _____	New Number: Yes: _____	No: _____
Work Phone (____) _____	New Number: Yes: _____	No: _____

Have you been arrested, cited, jailed or appeared in court since your last report? Yes: _____ No: _____

Date: _____ Charge(s): _____ Citation #: _____

Explanation/Disposition: _____

When you were placed on probation, the sentencing judge ordered you to complete certain conditions. Indicate what you are doing.

- | | | |
|--|----------------------|-------------------------------------|
| 1. Attending Alcohol/Drug Program | Yes: _____ No: _____ | In Compliance? Yes: _____ No: _____ |
| 2. Taking Antabuse or Methadone | Yes: _____ No: _____ | Where: _____ |
| 3. Attending Domestic Violence Program ... | Yes: _____ No: _____ | In Compliance? Yes: _____ No: _____ |
| 4. Attending other counseling | Yes: _____ No: _____ | In Compliance? Yes: _____ No: _____ |
| 5. Paying Fine or Probation Fee | Yes: _____ No: _____ | Amount Paid : _____ |
| 6. Attending School or Training Program | Yes: _____ No: _____ | Name: _____ |
| 7. Seeking employment | Yes: _____ No: _____ | Where: _____ |
| 8. Doing Community Service? Hours | Yes: _____ No: _____ | Where: _____ |
| 9. Any Alcohol or Drug Use | Yes: _____ No: _____ | |
| 10. Valid Drivers License | Yes: _____ No: _____ | |
| 11. Liability Insurance | Yes: _____ No: _____ | |
| 12. Are you Driving? | Yes: _____ No: _____ | |
| 13. AA Log attached to this report? | Yes: _____ No: _____ | Have No AA Condition: _____ |
| 14. Antabuse Log Attached | Yes: _____ No: _____ | |
| 15. Paying Restitution | Yes: _____ No: _____ | Amount: _____ |

Comments: _____

Would you like to see your Probation Counselor? Yes: _____ No: _____

If more forms are needed, please stop by the probation office, make your own copies, or download from
www.ci.auburn.wa.us

The preceding responses are true and were answered to the best of my knowledge.

Date: _____

Signature